

Customer No. 035884

PATENT  
Attorney Docket: 2080-3-31

In re application of:

Eun Sam Kim  
Serial No: 09/922,818  
Filed: August 6, 2001  
For: METHOD FOR EDITING PROGRAM IN DIGITAL  
BROADCASTING RECEIVER

Art Unit: 2621

Examiner: Helen Shibu  
Confirmation No.: 8857

Mail Stop AF  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a RESPONSE in the above-identified application.

- Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.  
 A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.  
 A petition for extension of time for \_\_\_\_\_ month(s) is enclosed.  
 An information disclosure statement in accordance with 37 CFR 1.56 and 1.97 is enclosed.  
 A formal drawings (Figs. \_\_\_\_\_) are enclosed.  
 No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	20	-	20	**	0	LG=\$50 SM=\$25	\$50
INDEPENDENT CLAIMS FEE	3	-	3	***	0	LG=\$200 SM=\$100	\$200
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180		\$ 0
					TOTAL	\$ 0	

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

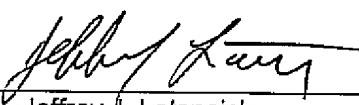
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE Is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE Is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) Is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- Please apply the filing fee in the amount of \$\_\_\_\_\_ to Deposit Account No. 50229.  
 Please apply the extension fee of \$\_\_\_\_\_ to Deposit Account No. 502290.  
 Please apply the RCE filing fee of \$\_\_\_\_\_ to Deposit Account No. 502290.  
 Please apply the IDS filing fee in the amount of \$\_\_\_\_\_ to Deposit Account No. 502290.  
 Please apply the petition fee in the amount of \$\_\_\_\_\_ to Deposit Account No. 502290  
 The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 502290.  
 Any filing fees under 37 CFR 1.16 for the presentation of extra claims.  
 Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,  
LEE, HONG, DEGERMAN, KANG & SCHMADEKA

Date: July 19, 2006

By:   
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